

EBilling - Paper Back-up

PPI No.: _____
 Customer ID: _____
 Date: _____
 No. of sheets _____ of _____
 Contact number _____



Tariff/Product	Destination	Format/Insurance	Quantity	Weight Step (g)	Item Price	Total Postage	Total Weight (Kg) <i>SLP ONLY</i>	Bag Quantity <i>SLP ONLY</i>
Total								

Customer Print Name:_____

GPL Print Name: _____

Date Stamp:

Notes:

Instructions

Call Customer Services on 711720 and let them know you will using a paper form
Complete this form in full
Ensure that it is included with your post
Take a copy for your own records, if required

Definitions

PPI No. This can be found on your PPI envelope or stamp
Customer ID This can be found on your monthly invoice as A/c Ref.
Date This should be today's date
No. of sheets This ensures we have all your paperwork e.g. 1 of 3